

Image# 14952594311

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Gwen Graham			2. Candidate's FEC Identification Number H4FL02062		
(b) Address (number and street) PO Box 310			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Tallahassee FL 32302			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House		6. State & District of Candidate FL 02	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Graham for Congress		
(b) Address (number and street) PO Box 310		
(c) City, State, and ZIP Code Tallahassee FL 32302		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Murphy Graham Victory for Florida		
(b) Address (number and street) 410 1st St, SE Suite 310		
(c) City, State, and ZIP Code Washington DC 20003		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Gwen Graham [Electronically Filed]	Date 11/19/2014
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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